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ARMY ANNOUNCES FINDINGS AND RECOMMENDATIONS OF STUDIES OF DOMESTIC VIOLENCE INCIDENTS AT FORT BRAGG AND ACTIONS TAKEN

FORT BRAGG, N.C. - Army studies of the five homicide cases that occurred this summer at Fort Bragg, N.C. have concluded that marital discord, high personnel tempo (PERSTEMPO) that contributed to marital discord; and misperceptions and career concerns about seeking marital or behavioral counseling were common elements in these cases.

Multiple investigations were conducted at Fort Bragg in August and September in order to ensure a comprehensive, thorough examination of all aspects of the domestic violence tragedies that occurred there. A 19-member Epidemiological Consultation (EPICON) team consisting of behavioral health experts from Headquarters, Department of the Army (HQDA) and the Centers for Disease Control and Army prevention program experts and chaplains worked for three weeks at Fort Bragg to understand what happened, determine if the incidents were statistically significant, identify potential causal factors, synthesize findings in a local and systemic context and recommend policy and program changes.

The EPICON team conducted interviews with military leadership, medical professionals, leadership of support agencies, military and civilian law enforcement authorities and civilian public health authorities; performed psychological autopsies on the two homicide-suicide cases and conducted anonymous focus groups with soldiers, spouses, leadership and healthcare and social services providers.

Fort Bragg initiated and conducted Serious Incident Review Boards (SIRBs) to investigate all circumstances surrounding the homicides and suicides.

A detailed executive summary outlining the methodology, findings and recommendations of the reviews accompanies this news release. Concerning the possible role of the anti-malaria drug Mefloquine (Lariam) which has been mentioned in many media accounts, the EPICON study determined that Mefloquine (Lariam) was unlikely to be the cause of the tragic clustering of domestic violence incidents. The Army prescribes Mefloquine (Lariam) which is an FDA-approved drug, to personnel deploying to places where malaria is endemic. Additional study findings were that family readiness groups to assist families during deployments vary in implementation, command support and resourcing; and procedural inconsistencies exist in redeployment transition programs.

In response to the incidents, Fort Bragg conducted a review of its existing responses to domestic violence incidents and developed a new strategy focused on increased awareness of domestic violence incidents and reviewed existing support programs for victims and families. Fort Bragg has also encouraged and expanded outreach to victims and families residing in the surrounding area. Highlights of actions taken at Fort Bragg include:

ARMY FINDINGS-3-3-3-3

- Hosting workshops on Installation Family Advocacy and Community Family Advocacy to focus on improving Fort Bragg's response to domestic violence and increase the understanding and interaction among local victim advocate groups and family advocacy groups.
- Hosting a Fort Bragg Senior Leader Seminar to discuss strategies to emphasize the commander's role in preventing and resolving domestic violence.
- Implemented the DoD-sponsored Ceridian Lifeworks System (1-800 Number) on November 1 to assist families with a myriad of issues (to include domestic violence).
- Began a direct mailing campaign that went out to all spouses which included information on the Ceridian 1-800 number, an additional handout with locals contact numbers and a laminated wallet sized card with local contact numbers. Subsequent mailings will go out to dual military families and single parent households.
- Instituted an agreement to exchange information on domestic violence incidents. Local
 officials are currently working to expand this agreement to the remaining six surrounding
 counties.
- Instituted a revision of Fort Bragg command policy increasing the mandatory separation period after a report of domestic violence from 48 to 72 hours.
- Instituted immediate counseling programs for soldiers returning from a forward-deployed location.

ARMY FINDINGS-4-4-4-4

- Reinforced redeployment procedures for soldiers redeploying from Afghanistan by instituting a more detailed mental health questionnaire from Army medical system and receipt of mandatory separation/reunion counseling from Army Chaplains.

The Assistant Secretary of the Army (Manpower and Reserve Affairs) (ASA M&RA) directed a review and evaluation of Army domestic violence prevention and intervention programs and policies. The Army formed working groups of subject matter experts to develop strategies to implement consolidated investigative recommendations Army-wide. Other actions the Army has taken include:

- Revising and publishing its regulation containing the policies and procedures for handling spouse and child abuse. When published, commanders will have the ability to issue and monitor restraining orders. The revised regulation also provides guidelines for the use of victim advocates and the establishing Fatality Review Committees.
- Formed a working group headed by the Army's Deputy Chief of Staff for Operations (G-3) to address deployment frequency and the need for a "decompression" period for soldiers returning from overseas deployments.
- Providing additional staffing through the Army's Human Resources' Well-Being Division to better integrate support services for soldiers and family members.

ARMY FINDINGS-5-5-5

Formed a working group headed by ASA (M&RA) and the Deputy Chief of Staff for Personnel (G-1) to review other recommendations resulting from the reviews to address PERSTEMPO, behavioral healthcare and prevention programs, outreach programs and redeployment and transition programs.

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(Editor's note: For more information about actions taken at Fort Bragg, contact the XVIII Airborne Corps & Fort Bragg Public Affairs Office at (910) 396-5600. For additional information about Army-level actions, contact Army Public Affairs at (703) 697-5662.)